PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10814362

					<u> </u>	·						
CLAIMS A			(Column 1)		(Column 2)		-	SMALL ENTITY TYPE		OF	OTHER TO	
TOTAL CLAIMS			175	15				RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FI	SE 385.0	0 OF	BASIC FE	770.00
Ţ	OTAL CHARGE	EABLE CLAIMS	75 minus 20=		• 55			X\$ 9=		OF	XS18=	990
II—	DEPENDENT			ninus 3 =	. 3			X43=		OR	X86=	1)2
М	ULTIPLE DEPE	ENDENT CLAIM F	PRESENT	•].	+145=		OR		
* 1	f the differenc	e in column 1 is	less than z	ess than zero, enter "0" in column 2				TOTAL		OR	<u> </u>	
	CLAIMS AS AMENDED - PART II									_	OTHER	THAN
·		,	(Column 2) (Column			_	SMALL	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAI FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	ENTATION OF M	Minus	DENDENT	CL AUA	=		X43=		OR	X86=	
	1						'	+145=		OR	+290=	-
								TOTAL		OR	TOTAL	
·	Ç Ç	A	DDIT. FEE			ADDIT. FEE	<u></u>					
		(Column 1) CLAIMS		(Colum HIGHE		(Column 3)	1 -					
5		REMAINING . AFTER AMENDMENT		NUMBI PREVIOU PAID F	JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MU	Minus	***		=		X43=	·	OR	X86=	
	THOTTRESE	MATION OF MO	LIPLE DEF	ENDENT	LAIM			+145=		OR	+290=	
	·							. TOTAL		OR ,	TOTAL	
ADDIT. FEE ADDIT. FE (Column 1) (Column 2) (Column 3)												·
MEN	`	CLAIMS REMAINING AFTER		HIGHES NUMBE PREVIOU	ST SR	PRESENT	Г	DATE	ADDI-	l		ADDI-
		AMENDMENT	.	PAID FO		EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total		Minus	**	-+	=		X\$ 9=		OR	X\$18=	
	Independent		Minus		I	- _		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									``` 		
• 11 1	If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR _	+290=	
H	* If the "Highest Number Proviously Poid For IN TUIC CDACE is to a dear the contract of the co									OR A	TOTAL DDIT. FEE	
Tr	ne "Highest Numb	per Previously Paid	For* (Total or	Independent)	ss than is the h	s, enter "3." ighest number		DIT. FEE	ropriate box			